#### U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2022

# **ELEVATION CERTIFICATE**

**Important:** Follow the instructions on pages 1–9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A – PROPERTY INFORMATION					FOR INSUF	RANCE COMPANY USE	
A1. Building Owner's Name D.R. HORTON, INC					Policy Numl	oer:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number: 726 COQUINA BAY DRIVE							AIC Number:
City CONWAY				State SC		ZIP Code 29526	
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOCHAVEN LOT 338 PH. 3A, PIN# 340-01-02-0055						
A4. Building Use (e	A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)  RESIDENTIAL						
A5. Latitude/Longit	ude: Lat. 3	3°51'39"N	Long.	79°00'19" W	Horizontal Datur	n: NAD 1	927 X NAD 1983
A6. Attach at least a	2 photograph:	s of the building if the	Certifica	ate is being used to	obtain flood insura	ince.	
A7. Building Diagra	ım Number	1A					
A8. For a building v	with a crawlsp	pace or enclosure(s):					
a) Square foot	age of crawls	pace or enclosure(s)	N	J/A sq ft			
b) Number of p	permanent flo	od openings in the cra	wlspace	e or enclosure(s) wit	thin 1.0 foot above	adjacent gra	de N/A
c) Total net are	ea of flood op	enings in A8.b	N/A s	sq in			
d) Engineered	flood opening	gs? ☐ Yes ☐xNo	)				
A9. For a building v	vith an attach	edgarage:					
a) Square foot	age of attach	ed garage416		sq ft			
b) Number of p	permanent flo	od openings in the atta	ached g	arage within 1.0 foo	t above adjacent g	rade	N/A
c) Total net are	ea of flood op	enings in A9.b	N/A	sq in			
d) Engineered	flood opening	gs? Yes XN	О				
	SE	CTION B – FLOOD II	NSURA	NCE RATE MAP	(FIRM) INFORMA	TION	
B1. NFIP Communi HORRY COUNTY		ommunity Number		B2. County Name HORRY			B3. State SC
B4. Map/Panel Number 45051C0532	B5. Suffix K	B6. FIRM Index Date 12/16/2021	E R	IRM Panel ffective/ evised Date 12/16/2021	B8. Flood Zone(s	(Zoı	se Flood Elevation(s) ne AO, use Base od Depth) *N/A
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:  [ FIS Profile ] FIRM [ Community Determined ] Other/Source:							
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 Other/Source:							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🗌 Yes, 🗓 No							
Designation D	Date:		CBRS	☐ OPA			

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City State ZIP Code CONWAY SC 29526			Company NAIC Number		
SECTION C – BUILI	DING ELEVATION INFORM	ATION (SURVEY RI	EQUIRED)		
	, –	Building Under Constru	uction* X Finished Construction		
*A new Elevation Certificate will be require		•			
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO. Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.  Benchmark Utilized: SC VRS OBSERVATION Vertical Datum: NAVD88					
Indicate elevation datum used for the eleva	ations in items a) through h) be	elow.			
☐ NGVD 1929 🔀 NAVD 1988 [					
Datum used for building elevations must be	e the same as that used for th	e BFE.	Check the measurement used.		
a) Top of bottom floor (including basemen	t, crawlspace, or enclosure flo	or) <u>22.2</u>	X feet meters		
b) Top of the next higher floor		N/A	X feet meters		
c) Bottom of the lowest horizontal structur	al member (V Zones only)	N/A	X feet  meters		
d) Attached garage (top of slab)		21.7	X feet meters		
e) Lowest elevation of machinery or equip (Describe type of equipment and location		*22.0	X feet meters		
f) Lowest adjacent (finished) grade next t	o building (LAG)	21.4	X feet  meters		
g) Highest adjacent (finished) grade next	to building (HAG)	21.7	X feet meters		
h) Lowest adjacent grade at lowest elevat structural support	ion of deck orstairs, including	N/A	X feet meters		
SECTION D – SUF	RVEYOR, ENGINEER, OR A	RCHITECT CERTIF	ICATION		
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.					
Were latitude and longitude in Section A provid	ed by a licensed land surveyo	r? ⊠Yes □No	Check here if attachments.		
Certifier's Name	License Number		12/29/2022 L-26959		
WALTER B. SHEETS	L-26959		CAS		
Title LAND SURVEYOR			STITUTH SONO TO THE STITUTE OF THE S		
Company Name					
RLA ASSOCIATES, PA					
Address 14323 OCEAN HIGHWAY, STE 4139			SURVECTO		
City PAWLEYS ISLAND	State SC	ZIP Code 29585	MINTER B. STUM		
Signature	Date	Telephone	-		
Walter B. Sheets	12/29/2022	843-879-9091			
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.					
Comments (including type of equipment and location, per C2(e), if applicable)					
*B8 & B9. PER CURRENT FEMA F.I.R.M., STRUCTURE AND LOT APPEAR TO BE LOCATED IN FLOOD ZONE X. PER HORRY COUNTY GIS MAP, LOT APPEARS TO LIE IN AN HORRY COUNTY SUPPLEMENTAL FLOOD ZONE WITH A BFE OF 17.0'. STRUCTURE DOES NOT APPEAR TO LIE IN THE HORRY COUNTY SUPPLEMENTAL FLOOD ZONE.					
*C2. e) HVAC UNIT. ELEVATION SHOT ON TOP OF HVAC RISER.					

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MPORTANT: In these spaces, copy the correspondi	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and 726 COQUINA BAY DRIVE	,		Policy Number:
,		Code 9526	Company NAIC Number
SECTION E – BUILDING ELI FOR ZONE	EVATION INFORMATION AND ZONE A (WI		REQUIRED)
For Zones AO and A (without BFE), complete Items E1-complete Sections A, B, and C. For Items E1–E4, use nonly, enter meters.			
E1. Provide elevation information for the following and of the highest adjacent grade (HAG) and the lowest at a) Top of bottom floor (including basement, crawlspace, or enclosure) is			
b) Top of bottom floor (including basement, crawlspace, or enclosure) is  b) Top of bottom floor (including basement, crawlspace, or enclosure) is		feet meter	
E2. For Building Diagrams 6–9 with permanent flood op the next higher floor (elevation C2.b in the diagrams) of the building is	enings provided in Section	on A Items 8 and/or	
E3. Attached garage (top of slab) is		☐ feet ☐ meter	
E4. Top of platform of machinery and/or equipment servicing the building is		☐ feet ☐ meter	
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes		floor elevated in acc	
SECTION F – PROPERTY OWN	IER (OR OWNER'S REP	RESENTATIVE) CE	ERTIFICATION
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	e who completes Section e statements in Sections	ns A, B, and E for Zo A, B, and E are cor	one A (without a FEMA-issued or rect to the best of my knowledge.
Property Owner or Owner's Authorized Representative's	s Name		
Address	City	St	ate ZIP Code
Signature	Date	Те	elephone
Comments			

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City CONWAY	State SC	ZIP Code 29526		Company NAIC Number			
SECTION G – COMMUNITY INFORMATION (OPTIONAL)							
The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.							
	engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation						
G2. A community official completed Section Zone AO.	_	·		·			
G3. The following information (Items G4–	G10) is provided for	community floodplain man	ageme	entpurposes.			
G4. Permit Number	G5. Date Permit Is	ssued		ate Certificate of ompliance/Occupancy Issued			
G7. This permit has been issued for:	New Construction	Substantial Improveme	nt				
G8. Elevation of as-built lowest floor (including	•	of the	buildi	ng: feet			
G9. BFE or (in Zone AO) depth of flooding at t			feet	meters Datum			
G10. Community's design flood elevation:	_		feet	meters Datum			
Local Official's Name		Title					
Community Name		Telephone					
Signature		Date					
Comments (including type of equipment and location, per C2(e), if applicable)							
				☐ Check here if attachments.			

#### **BUILDING PHOTOGRAPHS**

OMB No. 1660-0008

See Instructions for Item A6. Expiration Date: November 30, 2022

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City CONWAY	State SC	ZIP Code 29526	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



FRONT LEFT VIEW 12/29/2022

**ELEVATION CERTIFICATE** 



FRONT RIGHT VIEW 12/29/2022

#### **BUILDING PHOTOGRAPHS**

**ELEVATION CERTIFICATE** 

Continuation Page

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City CONWAY	State SC	ZIP Code 29526	Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



REAR RIGHT VIEW 12/29/2022



REAR LEFT VIEW 12/29/2022